Attorney Docket No. 05569.0004.CNUS10

Date: November 12, 2003

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s):

McCafferty, et al.

Application No.:

09/726,219

Filed:

November 28, 2000

For:

METHOD FOR PRODUCING MEMBERS OF SPECIFIC

BINDING PAIRS

Group Art Unit:

1639

Examiner:

P. Ponnaluri

CERTIFICATE OF MAILING

I hereby certify that this paper is being deposited with the United States Postal Service as first class mail in an envelope addressed to Mail Stop, Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this date.

11/12/03

Date

David W. Clough, Ph. Registration No. Attorney for Applicant(

TRANSMITTAL

Mail Stop Non-Fee Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith are the following:

- 1. Response to Office Action of August 12, 2003. (X)
- 2. (X) Change of Address Communication; along with a copy of the Revocation and Appointment Power of Attorney (previously filed).
- 3, (X) (8) Terminal Disclaimers, each having a fee of \$110 charged to Deposit Account No. 08-3038 (\$880).
- Fee for Claims 4.
 - (X) No additional fee is required.

The fee for additional claims in accordance with 37 C.F.R. §1.16(b)-(d) has been calculated as shown below:

					SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	Claims Remaining After Amendment	Highest No. Previously Paid for		Present Extra	Rate	Additional Fee	Rate	Additional Fee
Total	9	Minus	20	•	x 9	•	x 18	-
Indep.	2	Minus	5	-	X 43	-	x 86	-
Fee for Multiple Dependent Claims					+145	•	+290	-
TOTAL ADDITIONAL FEES						-	OR	-

AMENDMENT TRANSMITTAL Attorney Docket No. <u>055690.0004.CNUS10</u>

Method of Payment of Fees

- () Enclosed is our firm check in the amount of: \$
- (x) Charge \$ 880.00 to Deposit Account No. 08-3038 (fee for (8) Terminal Disclaimers).
- 6. (X) The Commissioner is hereby authorized to charge any additional fees which may be required in this application under 37 C.F.R. §§1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 08-3038. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 08-3038. This sheet is filed in duplicate.

Respectfully Submitted,

HOWREY SIMON ARNOLD & WHITE, LLP

November 12, 2003 (Date)

HOWREY SIMON ARNOLD & WHITE, LLP 321 N. Clark Street, Suite 3400. Chicago, Illinois 60610 (Direct) Phone No. (312) 595-1408 (Direct) Fax No. (312) 595-2250

Bv:

David W. Clough, Ph.D. Registration No. 36,10